

South Middle School Intramurals

Quarter #3: Jan. 23-Mar. 1

Time: 2:45-3:45 (Monday and Wednesday)

Questions: jana.adamson@usd305.com

Limit 24

Permission Forms are Required

First 24 will be accepted. You will be notified if your student IS NOT going to be able to participate.

Cost: **\$2.00** to participate at “The Sky”

Please complete form and return with \$2.00 no later than Jan. 18th

If unable to pay the \$2.00 still return your form

Front Office or Mrs. Adamson (Room 313)

Participant Name: _____

Grade: _____

Parent Phone Number: _____

(Number we can reach you between 2:45pm – 3:45pm): _____

Parent Email: _____

Date _____

WAIVER: IN CONSIDERATION OF MY CHILD’S PARTICIPATION IN THIS ACTIVITY, I HEREBY RELEASE AND DISCHARGE SOUTH MIDDLE SCHOOL AND ALL PERSONS CONNECTED WITH THE ACTIVITY FROM ANY LIABILITY ARISING FROM ILLNESS, INJURY AND DAMAGE MY CHILD MAY SUFFER AS A RESULT OF PARTICIPATION OF THIS ACTIVITY. I ALSO UNDERSTAND I AM RESPONSIBLE FOR ANY COST INCURRED FOR MEDICAL SERVICES OR ILLNESS, INJURIES AND DAMAGES TO MY CHILD WHILE PARTICIPATING IN THE ACTIVITY.